



<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	Application Number	09/833,922
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	First Named Inventor	O'Shea G., et. a.
	Group Art Unit	2136
	Examiner Name	Parthasarathy, P.
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ENCLOSURES (check all that apply)		
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SIGNATURE OF ATTORNEY OR AGENT					
Signature		Reg. No.	37,773		
Name of Attorney or Agent		James Banowsky			
Date	January 14, 2005	Tel.	(425) 705-3539	Facsimile No.	(425) 936-7329
Assignee Name:		MICROSOFT CORPORATION ONE MICROSOFT WAY REDMOND, WA 98052			
Customer Number:		22971			